FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

RECEIVED

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SEP 1 3 2007 NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION

FORM D

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMP

SEC USE ONLY Prefix

Name of Offering (Check if this is an	amendment and name has changed, and indicate change.)	
Limited Liability Company Interests in RQ	S Migration Fund LLC	
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) ☐ 1	JLOE
Type of Filing: New Filing A	mendment	
·		[] [] [] [] [] [] [] [] [] [] [] [] []
	A. BASIC IDENTIFICATION DATA	07077748
Enter the information requested about the	e issuer	
Name of Issuer (Check if this is an ROS Migration Fund LLC	amendment and name has changed, and indicate change.)	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
c/o Roxbury Capital Management, LLC, 100 V	Wilshire Blvd, Ste 1000, Santa Monica, CA 90401	(310) 917-5600
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)		
Brief Description of Business		
Biter Description of Business		
Investment Fund		
Type of Business Organization		PROCESSED
corporation	limited partnership, already formed other (please specify	
business trust	☐ limited partnership, to be formed limited liability comp	
· ·	Month Year	SEP 2 0 2007
Actual or Estimated Date of Incorporation or	0 7 0 7 🖾 Actual 🗀 Estin	IAICU 7.1
Organization:	(Caranana Jaman II S. Dantal Samian abbumulation for States	THOMSON
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviation for State:	FINANCIAL
	CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5), copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION ·

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number

1 of 9

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if individual)							
Roxbury Capital Manageme	nt, LLC						
Business or Residence Addres	s (Number and	Street, City, State, Zip Code	!)				
100 Wilshire Blvd, Stc 1000	, Santa Monica, (CA 90401					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner		
Full Name (Last name first, if	individual)	· · · · · · · · · · · · · · · · · · ·					
Beh, Brian				_			
Business or Residence Addres	•	Street, City, State, Zip Code	•				
c/o Roxbury Capital Manage	ment, LLC, 100	Wilshire Blvd, Ste 1000, Sa	inta Monica, CA 90401				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Browne, Anthony							
Business or Residence Address	•	Street, City, State, Zip Code	•				
c/o Roxbury Capital Manage	ment, LLC, 100	Wilshire Blvd, Ste 1000, Sa	inta Monica, CA 90401				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Business or Residence Address	s (Number and	Street, City, State, Zip Code)				
				·	<u>.</u>		
	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Business or Residence Address	Olive Verse	Street, City, State, Zip Code	<u> </u>				
Business of Residence Address	(saumoei and	sarcei, Chy, State, Zip Code	,				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if	individual)		······································				
Business or Residence Address	(Number and	Street, City, State, Zip Code	<u> </u>				
Dublicas of respective registra	(I tumber und	ancer, eny, ande, zip code	,				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Business or Residence Address	(Number and	Street, City, State, Zip Code)				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
	II 1	blank share on same and	additional applies of this steel	L on management			
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)							

	B. INFORMATION ABOUT OFFERING					
		Yes	No			
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	. 🗆	⊠			
	Answer also in Appendix, Column 2, if filing under ULOE.					
2.	What is the minimum investment that will be accepted from any individual?	<u>\$ 100.</u>	000			
		Yes	No			
3.	Does the offering permit joint ownership of a single unit?	. 🛛				
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any					
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or					
	states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.					
Full	Name (Last name first, if individual)					
		<u> </u>				
Busi	ness or Residence Address (Number and Street, City, State, Zip Code)					
Nam	e of Associated Broker or Dealer					
State	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
	Check "All States" or check individual States)		— 411.6:			
	AK AZ AR CA CO CT DE DC FL	GA HI	All States			
_						
Ľ	L IN LA KS KY LA ME MD MA MI	MN MS	МО			
	IT NE NV NH NJ NM NY NC ND OH	OK OR	PA			
F	U SC SD TN TX UT VT VA WA WV	wi w	Y PR			
Full	Name (Last name first, if individual)					
D	ness or Residence Address (Number and Street, City, State, Zip Code)					
Busi	ness or Residence Address (Number and Street, City, State, Zip Code)					
Nam	e of Associated Broker or Dealer					
State	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
(4	Check "All States" or check individual States)		☐ All States			
	L AK AZ AR CA CO CT DE DC FL	GA HI	ID			
	L IN IA KS KY LA ME MD MA MI	MN MS	МО			
_ N	NE NV NH NJ NM NY NC ND OH	OK OR	PA			
8	I SC SD TN TX UT VT VA WA WV	wi w	r PR			
Full	Name (Last name first, if individual)					
Busi	ness or Residence Address (Number and Street, City, State, Zip Code)					
Nam	e of Associated Broker or Dealer					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers						
-(Check "All States" or check individual States)		All States			
	AK AZ AR CA CO CT DE DC FL	GA HI	ID			
	L IN IA KS KY LA ME MD MA MI	MN M	S MO			
	AT NE NV NH NJ NM NY NC ND OH	OK OF	PA			
	RI SC SD TN TX UT VT VA WA WV	wi w	Y PR			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Sold Type of Security Aggregate Offering Price Debt Equity Convertible Securities (including warrants)..... Partnership Interests \$ 700,000 \$ <u>500,000,000</u> \$ 700,000 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchasers Accredited Investors \$ 700,000 Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of Type of Offering Sold Security Rule 505 Regulation A Rule 504 a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs..... Legal Fees \$ 25,000 Accounting Fees. Engineering Fees Sales Commissions (specify finders' fees separately)......

	C. OFFERING PRIC	CE, NUMBER OF INVESTORS, EXPENSES AND USE OF E	ROC	EEDS		
	expenses furnished in response to Part C Quest	e difference between the aggregate offering price given in response to Part C — Question I and total amished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the			\$ <u>4</u> '	99,975.000
5.	purposes shown. If the amount for any purpose is	roceed to the issuer used or proposed to be used for each of the not known, furnish an estimate and check the box to the left of t equal the adjusted gross proceeds to the issuer set forth in				
	·		0	Payment to fficers, Directors & Affiliates		Payments to Others
	Salaries and fees		\boxtimes	\$ <u>9,999,500</u>		so
	Purchase of real estate			S0		s0
	Purchase, rental or leasing and installation of mach	ninery and		s <u>0</u>		s <u>0</u>
	Construction or leasing of plant buildings and facil	lities		so		50
	Acquisition of other businesses (including the value be used in exchange for the assets or securities of a	ne of securities involved in this offering that may another issuer pursuant to a merger)		s <u> </u>		so
	Repayment of indebtedness			\$ <u> </u>		s <u> </u>
	Working capital			s <u> </u>		<u> </u>
	Other (specify): Investments			s <u>0</u>	Ø	\$ <u>489,975,500</u>
			П	s 0		S 0
					_	
				== :	⊠ ••••••	\$ <u>489,975,500</u>
Total Payments Listed (column totals added)			. \$499,975,000			
		D. FEDERAL SIGNATURE				
an u		e undersigned duly authorized person. If this notice is filed under to and Exchange Commission, upon written request of its staff, the Rule 502.				
Issu	er (Print or Type)	Signatuke Date		ı l		
RQ:	Migration Fund LLC	B (X)	9	111 107	•	
Nan	e of Signer (Print or Type)	Title of Signer (Print or Type)				
by:	Roxbury Capital Management, LLC	Manager				
by:	Brian Beh	Chief Executive Officer of the Manager				

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ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)